

Work Order ID 92336***92336***

Page 1

October 29, 2012 11:00:54 AM

Item ID: D3118-3 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Sign Assembly
Start Date: 10/29/12 Start Qty: 1.00 ***1*** Cust Item ID:
Required Date: 10/30/12 Req'd Qty: 1.00 ***1*** Customer:
Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start ***NR1***
QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3118	D								

100

0.00

100

PURCHASING

Purchasing

Memo

0.00

Purchasing

Issue P/O: 18275
Manufacture as per dwg D3118

Possible Supplier: Self powered lighting inc.

Supplier P#: AC/4ZZ
Material release note required

Sign should be self-luminous to min. brightness of 160 microlamberts

CL 12/10/29 (1)

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

Ensure Material Release Note is attached

Per 12/30 (1)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 92336***92336***

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October 29, 2012 11:00:54 AM

Item ID: D3118-3

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Sign Assembly

Start Date: 10/29/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 10/30/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Run Start ***NR1***Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

QC6- Inspect dimensions to drawing

0.00

120

QC

Memo

0.00

Quality Control

Check dims to dwg and certification attached

DAS
16
9-5-12

12/10/30

130

Identify as per dwg & Stock Location: _____

0.00

130

Packaging

Memo

0.00

Packaging

12/10/30

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

12/10/31

MF
12-10-30

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

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Picklist Print

October 29, 2012 11:00:54 AM

Page 1

Work Order ID: 92336

Parent Item: D3118-3

Start Date: 10/29/12

Required Date: 10/30/12

Parent Item Name: Sign Assembly

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP A: 02.05.15 New Issue NG
DWG REV.D DD VERF:EC

IPP REV:B 12.05.11 AS PER

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
AC/ALL Sign Assembly		Purchased	No				Each	0.0000		1			

212-072-637-107

10/29/12 (1)

NCR: Yes / No

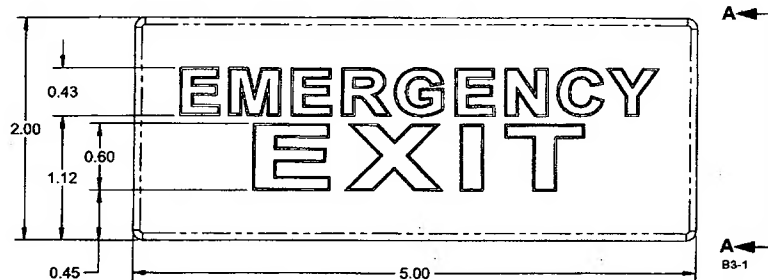
WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

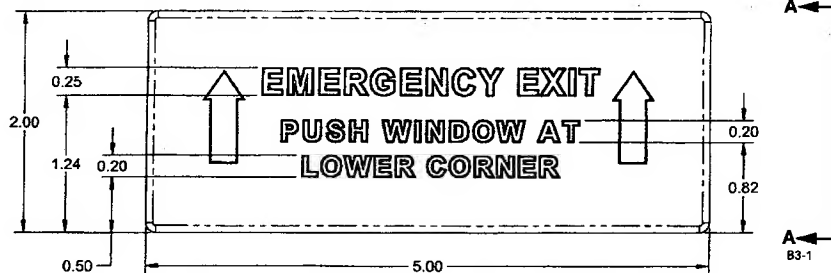
QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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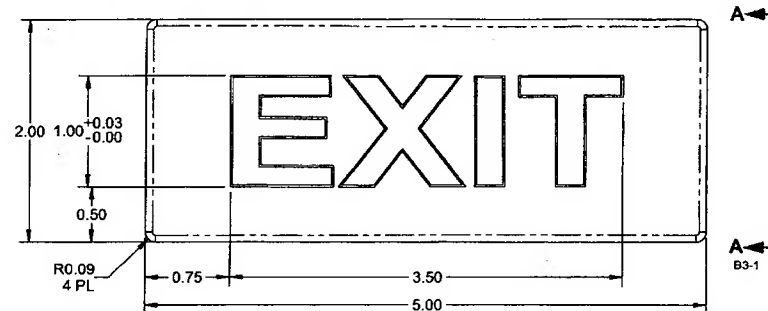
SPECIFICATION CONTROL DRAWING



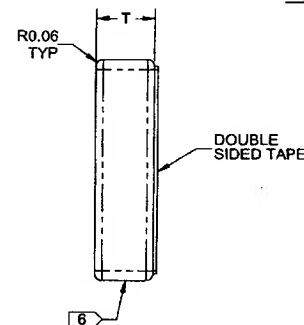
D3118-1 SIGN ASSEMBLY [9]
REPLACES PREMIER P/N 027-57000-01,
BHT P/N 46660-01008-00



D3118-3 SIGN ASSEMBLY [9]
REPLACES PREMIER P/N 027-57000-03,
BHT P/N 212-072-637-107



D3118-5 SIGN ASSEMBLY [9]



VIEW A-A C5-1
C1-1
B5-1

RELEASED
2012-05-10

NOTES:

- 1) MATERIAL: POLYCARBONATE
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: WITH DART P/N "D3118-X" AND B/N "BXXXXX" PER DART QSI 044 6.1
- 7) WEIGHT: 0.30 lbs EACH
- 8) POSSIBLE SUPPLIER: SELF POWERED LIGHTING INC.
31 WATERLOO AVE
BERWYN, PA 19312
PHONE: 484-595-9130
FAX: 484-595-9135
- 9) SEE TABLE FOR SUPPLIER PROCUREMENT P/N'S
- 10) SIGNS SHOULD BE A RED BACKGROUND, CLEAR LETTERING WITH WHITE BORDER AROUND EACH LETTER
- 11) SIGNS SHOULD BE SELF-LUMINOUS TO MINIMUM BRIGHTNESS OF 160 MICROLAMBERTS

CL12110129
W10192336

DART PART NUMBER	SUPPLIER PART NUMBER	THICKNESS T
D3118-1	AC4-O OR AC/4O	0.52
D3118-3	AC4-ZZ OR AC/4ZZ	0.52
D3118-5	AC4-A OR AC/4-A	0.66

D	UPDATED TO COMPLY WITH QSI 043; ADDED SUPPLIER P/N PROCUREMENT CHART (ZN A4-1). REF: PAR11-127.	MB	11.11.02
C	ADD D3118-5	RF	05.02.22
B	ADD MINIMUM BRIGHTNESS = 160 MICROLAMBERTS	RF	04.05.05
A	NEW ISSUE	RF	02.04.15
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	11.11.02		
DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA DRAWING NO. D3118 TITLE SIGN ASSEMBLY REV. D SHEET 1 OF 1 SCALE NTS COPYRIGHT © 2002 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION FROM DART AEROSPACE LTD.			

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

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Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO18275**

Purchase Order Date 10/29/12

PO Print Date 10/29/12

Page Number 1 of 1

Order From :

VU-EAG002

EAGLE COPTERS MAINTENANCE LTD.
823 MCTAVISH ROAD N E
CALGARY, AB T2E 7G9
CA

Contact Name

Vendor Phone

403-250-7370

Vendor Fax

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

USD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FXED
10/29/12

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	212-072-637-107	Sign Assembly	10/30/12 Yes	1.00 Each	FedEx PI collect	\$1,014.6000	\$1,014.60

Special Inst: AS PER DWG D3118 REV. D
B92336

PO Total:

\$1,014.60

**CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY**

Change Nbr: 1

Change Date: 10/29/12

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required **YES** NO

Eagle Copters Maintenance Ltd

823 McTavish Rd, NE
Calgary, Alberta T2E 7G9
Canada

Packing Slip

October 29, 2012

Telephone: (403) 250-7370

Fax: (403) 250-7110

* Aircraft On Ground *

Shipment number: SH#12-003459
Customer PO number: PO18275
Ship To: Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Canada
Phone: (613)632-5200

Ship Via: FED EX
Carrier Terms:

Waybill: 793955994094
Customer PO number: PO18275

Item	Part Number	Part Description	Current Location	Qty UOM	Serial Number	Lot Number
1	D3118-3	SIGN	Shipping Area	1 Each		LT-12-005414.1
Type of sale: Outright						

8/2/10/10

Sales Order Number: SO12-01736.001

Eagle PO Number:

Attn: Linda / Chantal

All Parts being sent on this packing slip have the original certification on file at Eagle Copters Ltd.

* End of Report *

>> denotes that the Packing Slip line item has already been printed.